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CONFIRMATION NO. 2257

<b>SERIAL NUMBER</b> 10/693,361	<b>FILING OR 371(c) DATE</b> 10/24/2003 <b>RULE</b>	<b>CLASS</b> 525	<b>GROUP ART UNIT</b> 1712	<b>ATTORNEY DOCKET NO.</b> SHA-47
<b>APPLICANTS</b> Shalaby W. Shalaby, Anderson, SC; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/422,651 10/31/2002 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 01/23/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance		<b>STATE OR COUNTRY</b> SC	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 20
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>8/11/06</i>				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 29698				
<b>TITLE</b> Functionalized, absorbable, segmented copolyesters and related copolymers				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	